

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Medical Review Division regarding a medical fee dispute between the requestor and the respondent named above.

## **I. DISPUTE**

1. a. Whether there should be reimbursement for dates of service 6-28-01 through 7-22-01.
- b. The request was received on 6-24-02.

## **II. EXHIBITS**

1. Requestor, Exhibit 1:
  - a. TWCC 60 and Letter Requesting Dispute Resolution
  - b. HCFAs
  - c. EOBs
  - d. Preauthorization letter dated 5-29-01
  - e. Medical Records
  - f. Any additional documentation submitted was considered, but has not been summarized because the documentation would not have affected the decision outcome.
2. Respondent, Exhibit 2:
  - a. TWCC 60
  - b. HCFAs
  - c. EOBs
  - d. Any additional documentation submitted was considered, but has not been summarized because the documentation would not have affected the decision outcome.
3. Per Rule 133.307 (g) (3), the Division forwarded a copy of the requestor's 14 day response to the insurance carrier on 9-3-02. Rule 133.307 (g) (4) or (5), the carrier representative signed for the copy on 9-4-02. No response to the Requestor's additional information was noted in the dispute packet. However, the response from the insurance carrier's initial three (3) day response was received in the Division on 6-25-02.
4. Notice of Additional Information submitted by Requestor is reflected as Exhibit #3 of the Commission's case file.

### **III. PARTIES' POSITIONS**

1. Requestor: Letter dated 8-23-02:  
“\_\_\_ underwent an Arthroscopic knee surgery on 06/28/01 at the direction of \_\_\_ and subsequently had a knee infection that resulted in an emergency admission. A consultation was done with \_\_\_ who is an infectious disease physician, on July 13, 2001. He had stated that \_\_\_ did have an infection in her left knee and that she should be treated with antibiotic treatment with surgery to include a debridement and drainage procedure... (Insurance Company) denied the initial surgery and all subsequent treatment because they stated that pre-authorization was not given to the initial procedure. However, preauthorization was originally given on May 29, 2001. \_\_\_ could not have her surgery at that time because she was ill and had to recuperate and was rescheduled for June 28, 2001. A courtesy call was made from my office to the insurance carrier’s representative on June 20, 2001 and authorization was give [sic] per \_\_\_ at \_\_\_”.
2. Respondent: Information obtained from TWCC 60.  
“Pre-Authorization not obtained – doctor failed to follow TWCC guidelines on Pre-Authorization ...”

### **IV. FINDINGS**

1. Based on Commission Rule 133.307(d) (1) (2), the only dates of service eligible for review are 6-28-01 through 7-22-01.
2. The Carrier has denied the disputed services as reflected on the EOBs as, “A – PREAUTHORIZATION REQUIRED BU NOT REQUESTED”
3. The following table identifies the disputed services and Medical Review Division's rationale:

DOS	CPT or Revenue CODE	BILLED	PAID	EOB Denial Code(s)	MARS	REFERENCE	RATIONALE:
6-28-01 6-28-01	29880 29877-51	\$2800.00 \$1200.00	\$-0- \$-0-	A A	\$1831.00 \$ 708.00	TWCC Rule 134.600 (h); CPT Descriptors	<p>The Carrier has denied the disputed services as "A".</p> <p>The Pre-Authorization Determination #7111256-1, dated 5-29-01 reflects approval for the billed procedures. TWCC Rule 134.600 (h) requires that all non-emergency health care including inpatient hospital admissions be preauthorized. However the Rule is not restrictive on the time frame in which the provider must perform the services approved.</p> <p>Therefore, reimbursement is recommended in the amount of \$2,539.00.</p>
7-13-01	99221	\$ 150.00	\$-0-	A	\$ 66.00	TWCC Rule 134.600 (h); 133.1 (a) (7); CPT Descriptor	<p>The Carrier has denied the disputed services as "A".</p> <p>TWCC Rule 133.1 (a) (7) defines an emergency as "a medical emergency consists of the sudden onset of a medical condition manifesting itself by acute symptoms of sufficient severity, including severe pain, that the absence of immediate medical attention could reasonably be expected to result in placing the patient's health and/or bodily functions in serious jeopardy, and/or serious dysfunction of any body organ or part."</p> <p>Admission documentation dated 7-13-01 reflects "...a pleasant female who is only in distress when I manipulate the left knee... Temperature 98.9, respiratory rate 18, Pulse 90." Documentation also supported that the patient's lungs were clear and without expiratory wheezes. Bowel sounds were present with the abdomen soft and non tender. The left knee was mildly warm but described as "not erythematous". No cysts or lesions were noted. Ankle had full range of motion.</p> <p>Documentation does not support an emergency situation and no preauthorization is noted for the surgical procedure as billed.</p> <p>Therefore no services associated with this hospitalization are recommended for reimbursement.</p>

7-14-01 7-15-01 7-16-01	99231 99231 99231	\$80.00 for all dates of service	\$-0- \$-0- \$-0-	A A A	\$ 40.00 for all dates of service	TWCC Rule 134.600 (h); 133.1 (a) (7); CPT Descriptor	<p>The Carrier has denied the disputed services as “A”.</p> <p>TWCC Rule 133.1 (a) (7) defines an emergency as “a medical emergency consists of the sudden onset of a medical condition manifesting itself by acute symptoms of sufficient severity, including severe pain, that the absence of immediate medical attention could reasonably be expected to result in placing the patient’s health and/or bodily functions in serious jeopardy, and/or serious dysfunction of any body organ or part.”</p> <p>Admission documentation dated 7-13-01 reflects “...a pleasant female who is only in distress when I manipulate the left knee... Temperature 98.9, respiratory rate 18, Pulse 90.” Documentation also supported that the patient’s lungs were clear and without expiratory wheezes. Bowel sounds were present with the abdomen soft and non tender.. The left knee was mildly warm but described as “not erythematous”. No cysts or lesions were noted. Ankle had full range of motion.</p> <p>Documentation does not support an emergency situation and no preauthorization is noted for the surgical procedure billed.</p> <p>Therefore no services associated with this hospitalization are recommended for reimbursement.</p>
7-17-01	29871	\$1518.00	\$-0-	A	\$ 759.00	TWCC Rule 134.600 (h); 133.1 (a) (7); CPT Descriptor	<p>The Carrier has denied the disputed services as “A”.</p> <p>TWCC Rule 133.1 (a) (7) defines an emergency as “a medical emergency consists of the sudden onset of a medical condition manifesting itself by acute symptoms of sufficient severity, including severe pain, that the absence of immediate medical attention could reasonably be expected to result in placing the patient’s health and/or bodily functions in serious jeopardy, and/or serious dysfunction of any body organ or part.”</p> <p>Admission documentation dated 7-13-01 reflects “...a pleasant female who is only in distress when I manipulate the left knee... Temperature 98.9, respiratory rate 18, Pulse 90.” Documentation also supported that the patient’s lungs were clear and without expiratory wheezes. Bowel sounds were present with the abdomen soft and non tender. The left knee was mildly warm but described as “not erythematous”. No cysts or lesions were noted. Ankle had full range of motion.</p> <p>Documentation does not support an emergency situation and no preauthorization is noted for the procedure as billed.</p> <p>No reimbursement is recommended.</p>

7-22-01	99238	\$120.00	\$-0-	A	\$ 48.00	TWCC Rule 134.600 (h); 133.1 (a) (7); CPT Descriptor	<p>The Carrier has denied the disputed services as "A".</p> <p>TWCC Rule 133.1 (a) (7) defines an emergency as "a medical emergency consists of the sudden onset of a medical condition manifesting itself by acute symptoms of sufficient severity, including severe pain, that the absence of immediate medical attention could reasonably be expected to result in placing the patient's health and/or bodily functions in serious jeopardy, and/or serious dysfunction of any body organ or part."</p> <p>Admission documentation dated 7-13-01 reflects "...a pleasant female who is only in distress when I manipulate the left knee...Temperature 98.9, respiratory rate 18, Pulse 90." Documentation also supported that the patient's lungs were clear and without expiratory wheezes. Bowel sounds were present with the abdomen soft and non tender.. The left knee was mildly warm but described as "not erythematous". No cysts or lesions were noted. Ankle had full range of motion.</p> <p>Documentation does not support an emergency situation and no preauthorization is noted for the procedure as billed.</p> <p>No reimbursement is recommended.</p>
<b>Totals</b>		\$6,028.00	\$-0-				The Requestor <b>is</b> entitled to reimbursement in the amount of <b>\$2,539.00</b> .

Lesa Lenart  
Medical Dispute Resolution Officer  
Medical Review Division

### V. ORDER

Pursuant to Sections 402.042, 413.016, 413.031, and 413.019 the Medical Review Division hereby ORDERS the Respondent to remit \$2539.00 plus all accrued interest due at the time of payment to the Requestor within 20 days receipt of this order.

This Order is hereby issued this 11th day of November 2002.

Carolyn Ollar  
Medical Dispute Resolution, Supervisor  
Medical Review Division

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